Application Data Sh et

Application Information

Application Number::

Filing Date::

Application Type::

Divisional

Subject Matter::

Utility

CD-ROM or CDR?::

Number of CD Discs::

Number of copies of CDs::

Sequence Submission?::

Computer Readable Form

No

(CRF?)::

Number of Copies of CRF::

Title::

ISOMERASES PROTEINS

Attorney Docket No.::

PF-0730-1 DIV

Request for Early Publication::

No

Request for Non-Publication::

No

Total Drawings Sheets::

Small Entity::

No

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full capacity

First Name::

Olga

Middle Name::

Last Name::

Bandman

Name Suffix::

City of Residence::

Mountain View

State or Province of Residence:: CA

Initial 12/05/03

Street of mailing address::

366 Anna Avenue

City of mailing address::

Mountain View

State or Province of mailing

address::

CA

Country of mailing address::

US

Postal or Zip Code of mailing

94043

address::

)

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full capacity

First Name::

Dyung Aina

Middle Name::

M

Last Name::

Lu

Name Suffix::

City of Residence::

San Jose

State or Province of Residence::

Street of mailing address::

233 Coy Drive

City of mailing address::

San Jose

State or Province of mailing

address::

CA

CA

Country of mailing address::

US

Postal or Zip Code of mailing

95123

address::

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full capacity

First Name::

Henry

Middle Name::

Last Name::

)

Yue

Name Suffix::

City of Residence::

Sunnyvale

State or Province of Residence::

Street of mailing address::

826 Lois Avenue

City of mailing address::

Sunnyvale

State or Province of mailing

CA

CA

address::

Country of mailing address::

US

Postal or Zip Code of mailing

94087

address::

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full capacity

First Name::

Boa

Middle Name::

Last Name::

Tran

Name Suffix::

City of Residence::

Cupertino

State or Province of Residence:: CA

Street of mailing address::

202 Calvert Drive, Apt. 268

City of mailing address::

Cupertino

State or Province of mailing

address::

CA

Country of mailing address::

US

Postal or Zip Code of mailing

94014

address::

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country:: US

Status:: Full capacity

First Name:: Jennifer

Middle Name::

Last Name:: Hillman

Name Suffix::

City of Residence:: Santa Cruz

State or Province of Residence:: CA

Street of mailing address:: 1826 Rina Court

City of mailing address:: Santa Cruz

State or Province of mailing

address::

CA

Country of mailing address:: US

Postal or Zip Code of mailing

address::

95062

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full capacity

First Name:: Mariah

Middle Name::

Last Name:: Baughn

Name Suffix::

City of Residence:: 8547 W Homer Street

State or Province of Residence:: CA

Street of mailing address:: 8457 W Homer Street

City of mailing address:: Los Angeles

State or Province of mailing

address::

CA

US

Country of mailing address::

Postal or Zip Code of mailing

address::

90035

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

[50 characters max] For United States, type US, for countries other than the US, type the country name]

[Full capacity, unknown, deceased inventor, non-

signing, not relevant]

First Name::

Status::

Preeti

Middle Name::

Last Name::

Lal

Name Suffix::

City of Residence::

Santa Clara

State or Province of Residence:: CA

Street of mailing address::

P O Box 5142

City of mailing address::

Santa Clara

State or Province of mailing

CA

address::

Country of mailing address::

US

Postal or Zip Code of mailing

95056

address::

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full capacity

First Name::

Y Tom

Middle Name::

Last Name::

Tang

Name Suffix::

City of Residence::

San Jose

State or Province of Residence::

CA

Street of mailing address::

4230 Ranwick Court

City of mailing address::

San Jose

State or Province of mailing

address::

∹#

CA

Country of mailing address::

US

Postal or Zip Code of mailing

95118

address::

Correspondence Information

Correspondence Customer

27904

Number::

Representative Information

Representative Customer

27904

Number::

Domestic Priority Information

Application:: Continuity Type::

Parent Application:: Parent Filing Date::

This

Division of

10/049,797

02/12/02

Application

10/049,797

National Stage of

PCT/US00/22518

08/16/00

PCT/US00/2

which claims the benefit

60/149,388

08/16/99

2518

Assignee Information

Assignee name::

Incyte Corporation

Street of mailing address::

3160 Porter Drive

City of mailing address::

Palo Alto

State or Province of mailing

California

address::

Country of mailing address::

US

Postal or Zip Code of mailing

94304

address::